

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Nursing Foundations – 2025**

**Firelands Regional Medical Center School of Nursing**  
**Sandusky, Ohio**

**Student:** Rylee Bollenbacher

**Final Grade:** **Satisfactory**

**Semester:** **Fall**

**Date of Completion:** **12/1/2025**

**Faculty:** **Frances Brennan**, MSN, RN; **Amy Rockwell**, MSN, RN;  
**MSN, RN**

**Faculty eSignature:** **Nicholas A. Simonovich**,

**Chandra Barnes**, MSN, RN; **Nick Simonovich**, MSN, RN  
**Heather Schwerer**, MSN, RN; **Brittany Lombardi**, MSN, RN, CNE

**Teaching Assistant:** **Stacia Atkins**, BSN, RN

**DIRECTIONS FOR USE:**

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S)**, **Needs Improvement (NI)**, **Unsatisfactory (U)**, and **Not Available (NA)**. The faculty member will initial if in agreement with the student’s evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a “S, NI, U, or NA”. If the student does not self-rate, then it is an automatic “U”. A student who submits the clinical evaluation tool late will be rated as “U” in the appropriate competency(s) for that clinical week. Whenever a student receives a “U” in a competency, it must be addressed with a comment as to why it is no longer a “U” the following week. If the student does not state why the “U” is corrected, it will be another “U” until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. **An unsatisfactory or needs improvement as a final evaluation in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. Patterns of performance over the course of the semester will be utilized to determine the final competency evaluations. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.**

**METHODS OF EVALUATION:**

- |  |                     |
|--|---------------------|
| Skills Lab Checklists                    | Faculty Feedback    |
| Care Map Grading Rubric                  | Documentation       |
| Administration of Medications            | Clinical Reflection |
| Simulation Scenarios                     |                     |
| Skills Demonstration                     |                     |
| Evaluation of Clinical Performance Tool  |                     |
| Clinical Discussion Group Grading Rubric |                     |
| Lasater Clinical Judgment Rubric         |                     |

**ABSENCE (Refer to Attendance Policy)**

Date	Number of Hours	Comments	Make Up (Date/Time)
Faculty/Teaching Assistant’s Name			Initials
Chandra Barnes			CB
Frances Brennan			FB
Amy Rockwell			AR
Nicholas Simonovich			NS
Heather Schwerer			HS

Brittany Lombardi	BL
Stacia Atkins	SA

## PERFORMANCE CODE

### SATISFACTORY CLINICAL PERFORMANCE

**Satisfactory (S):** Safe, accurate each time, efficient, coordinated, confident, focuses on the patient, some expenditure of excess energy, within a reasonable time period, appropriate affective behavior, occasional supporting cues, minimal faculty feedback needed related to written clinical work.

### UNSATISFACTORY CLINICAL PERFORMANCE

**Needs Improvement (NI):** Safe, accurate each time, skillful in parts of behavior, focuses more on the skill and self rather than the patient, inefficient, uncoordinated, anxious, worried, and flustered at times, expends excess energy within a delayed time period, frequent verbal and occasional physical directive cues in addition to supportive cues, faculty feedback required in several areas of clinical written work.

**Unsatisfactory (U):** Failure to achieve the course competency, safe but needs faculty reminders constantly, not always accurate, unskilled, inefficient, considerable expenditure of excess energy, anxious, disruptive or omitting behaviors, focus on skills and/or self, continuous verbal and frequent physical cues, unsafe, performs at risk to patient/clients/others, unable to function, incomplete, erroneous, faulty, illegible clinical written work, no feedback sought from faculty or response to feedback not evident in submitted written work. If the student does not self-rate a competency the competency is graded "U." A "U" in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the "U", the faculty member (s) will continue to rate the competency unsatisfactory.

### OTHER

**Not Available (NA):** The clinical experience which would meet the competency was not available.

**\*Grey shaded weekly competency boxes do not need a student evaluation rating or faculty/teaching assistant initials.**

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Objective																
1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
<b>Competencies:</b>																
a. Identify spiritual needs of patient (Noticing).										S	N/a	S	N/a	S	N/a	S
b. Identify cultural factors that influence healthcare (Noticing).										S	N/a	S	N/a	S	N/a	S
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
<b>Faculty/TA Initials</b>							BL	CB	CB	NS	NS	NS	NS	NS	NS	NS
<b>Clinical Location; Patient age**</b>							3T-age 84	N/A	N/A	4N-age 80	NA	4N-age 79	N/a	4N-age 78	N/a	Final

\* End-of-Program Student Learning Outcomes  
 Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

**\*\*Document your clinical location and patient age in the designated box above.**

**Comments:**

Week 7-1(c,d) Great job this week showing respect for your patient's individual preferences, values, and needs while providing care. In your CDG, you did a nice job identifying your patient's abnormal assessment findings and priority concerns. This demonstrates the early development of clinical judgment, which is essential for safe and effective nursing practice. BL

Week 9 1(c,d) – Great job this week coordinating your care effectively while also respecting your patient’s preference, values, and needs. Your morning was a little rushed due to his pending surgery; however, you were able to use Maslow’s as a guiding framework to ensure his physiological needs were met through assessment and vital sign obtainment. While performing pre-surgical hygiene care, you were respectful of your patient, maintained his dignity, and provided psychosocial support. Well done! NS

Week 11 1(a-d) – This was an emotionally taxing week related to the significant lifestyle changes your patient will have to undergo as a result of his post-surgical complication. It was an excellent learning opportunity for you in many ways, and I thought you handled the situation very well. Your patient’s had numerous physiological priorities to focus on related to his decreased sensation in his bilateral lower extremities, requiring careful and detailed neurological assessments. What I wanted to make note of was the psychosocial aspect of the care that you provided. Your patient was under immense stress and frustration due to unintended outcomes. You were able to respond to his needs through empathy, communication, and support. It was evident that your patient felt comfortable in your care and appreciated the time spent with him. Great job prioritizing his psychosocial needs during a difficult situation. NS

Week 13 1(a-d) – You did a great job this week coordinating care for two separate patients. With each encounter, you used Maslows to prioritize their needs, addressing their physiological needs first, then focusing your attention to self-esteem and hygiene. NS

**Objective**

1. Summarize knowledge of anatomy, physiology, chemistry, nutrition, psychosocial and developmental principles in performance of basic physical assessment through use of clinical judgment skills. (3,4, 5)\*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
<b>Competencies:</b>																
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).							NS S	N/a	S	S	N/a	S	N/a	S	N/a	S
b. Use correct technique for vital sign measurement (Responding).							NS S	N/a	S	S	N/a	S	N/a	S	N/a	S
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).										S	N/a	S	N/a	S	N/a	S
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).										S	N/a	S	N/a	S	N/a	S
e. Collect the nutritional data of assigned patient (Noticing).										N/a	N/a	S	N/a	S	N/a	S
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).										N/a	N/a	N/a	N/a	N/a	N/a	NA
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).										S	N/a	S	N/a	S	N/a	S
<b>Faculty/TA Initials</b>							BL	CB	CB	NS	NS	NS	NS	NS	NS	NS

\* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

**Comments:**

Week 7- 2(a,b) Great job this week using correct techniques for measuring vital signs and completing a systematic head to toe assessment on your assigned patient. Your assessment was thorough and completed in a timely manner, and you were able to notice several abnormal findings. You did well recognizing pieces of your assessment

that you omitted to ensure you will improve in the future. Self-awareness is an important part of learning. It's completely normal to miss small things early on. As you gain more experience and spend more time at the bedside, you'll continue to grow in both confidence and competence. BL

Week 9 2(a) – Good work with your head to toe assessment this week, completing in a timely manner so that your findings could be communicated to the health care team prior to him leaving for surgery. You were able to notice numerous deviations from normal, specifically related to his musculoskeletal system and his leg fracture as a result of trauma. NS

Week 9 2(c) – A safety and falls assessment was completed using the Johns Hopkins Fall Risk assessment tool, noting a score of 13 indicating a high fall risk. You did well to explain the factors that led to the score and described nursing measures that were implemented to promote safety. Nice job promoting safety for your patient! NS

Week 9 2(d) – You recognized that your patient's limited mobility as a result of the non-weight bearing status to his left leg put him at risk for skin breakdown. Personal hygiene care was performed to maintain integrity. NS

Week 11 2(e) – You were able to collect and discuss the nutritional status of your patient this week in your CDG. You noted that his appetite was within normal limits and that his intake was adequate for his disease process. NS

Week 11 2(a) – Good work with your head to toe assessment this week, especially the neurological assessment. You were able to conduct a thorough assessment of the sensation and function of his lower extremities and documented your findings accurately. NS

Week 13 2(a) – Nice job with your assessments this week, noticing numerous deviations from normal. You have grown in your assessment skills throughout the semester and have enhanced your information seeking related to your findings. On day one, you noticed that your patient had a productive cough, which you were able to assess further noting the characteristics and additional symptoms your patient was experiencing. You also gained experience in assessing a wound vac in place for an abdominal incision. On day 2, you cared for a patient with neurological changes related to sensation below the waist. You used your previous experiences to closely monitor for changes in sensation, noting the importance of a focused neurological assessment. NS

Week 13 2(g) – Good work discussing your patients' diagnostic tests that were performed on day one. You were able to note the abdominal CT findings and discussed nursing implications based on the results. You were also able to explore and discuss a lumbar puncture that was scheduled for your patient on day 2. Although you did not get to witness this procedure, you were able to watch a video on the process and discussed implications. NS

**Objective**

2. Select communication techniques and appropriate boundaries with patients, families, and health care team members. (1,2,3,4,6,7)\*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
<b>Competencies:</b>							S	N/a	S	S	N/a	S	N/a	S	N/a	S
a. Receive report at beginning of shift from assigned nurse (Noticing).									S	N/a	N/a	S	N/a	S	N/a	S
b. Hand off (report) pertinent, current information to the next provider of care (Responding).										N/a	N/a	S	N/a	S	N/a	S
c. Use appropriate medical terminology in verbal and written communication (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
d. Report promptly and accurately any change in the status of the patient (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
e. Communicate effectively with patients and families (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
							BL	CB	CB	NS	NS	NS	NS	NS	NS	NS

**Faculty/TA Initials**

\* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

**Comments:**

Week 7-3(e) Although you were unable to have a lot of conversation with your patient this week due to his health status, you did a great job communicating to him what you were doing at all times. Its important to keep patients informed about the care you are providing even if they are unable to respond to you. BL

Week 9 3(e,f) – This week you had a unique experience of being able to accompany your patient to the operating room. You were able to communicate effectively with your patient prior to him leaving the floor, developing a rapport and being there to support him in the pre-op phase. In the OR you had the opportunity to collaborate with numerous health care professionals, requiring clear communication. You were able to participate as an accountable member of the health care team by ensuring all of his pre-op checklist items were completed and ensured he was prepared for the surgical team. Well done! NS

Week 11 3(e) – Great job this week with your communication skills with both the patient and his wife. You were able to interact with your patients and provided comfort during a difficult time. With his wife in the room, you ensured that she was a part of the plan of care and incorporated her in your discussions. NS

Week 13 3(f) – Throughout the entire semester you were an accountable member of the health care team, consistently performing nursing care and interventions without having to be prompted. You managed your time well, ensured care needs were met, and prioritized hygiene care for each of your patients. I appreciate the level of accountability in your care and always being on top of things. Well done! NS

**Objective**

3. Exemplify advanced searches in accessing electronic health care information and documenting patient care. (1,4,8)\*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
<b>Competencies:</b>									S							
a. Document vital signs and head to toe assessment according to policy (Responding).							NS S	N/a	S	S	N/a	S	N/a	S	N/a	S
b. Document the patient response to nursing care provided (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
c. Access medical information of assigned patient in Electronic Medical Record (Responding).*		S					S	N/a	S	S	N/a	S	N/a	S	N/a	S
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).*		S							S	S	N/a	S	N/a	S	N/a	S
e. Provide basic patient education with accurate electronic documentation (Responding).										S	N/a	S	N/a	S	N/a	S
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
<b>*Week 2 –Meditech Orientation</b>		BL					BL	CB	CB	NS	NS	NS	NS	NS	NS	NS
<b>Faculty/TA Initials</b>																

\* End-of-Program Student Learning Outcomes  
Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

**Comments:**

Week 2- 4(c,d) Great job listening attentively and actively participating in the Meditech orientation clinical. You demonstrated beginning competence in accessing a patient’s EHR, documenting care in an intervention, and locating patient data. You were able to access Lexicomp and locate patient education materials, as well as find nursing policies and procedures on the health system intranet. Great job! NS/CB/BL

Week 7- 4(a) Excellent job with your documentation this week in clinical. Your documentation for both your vital signs and head to toe assessment were thorough and accurate. A friendly reminder to be confident in your own assessment findings when documenting. Use the information you are given in report as a baseline for the patient's presentation, but with the understanding that assessment findings can change at anytime. 4(c) Great job in your CDG discussing the use of informatics and technology in the clinical setting. You provided a nice description of how you utilized the patient's vital signs data to look for trends and identify any changes. 4(f) Satisfactory completion of your CDG this week. Keep up all your hard work! BL

Week 9 4(a,b) – Great job with your time management and documentation this week. Although we did not have the opportunity to review documentation together, I appreciated your timeliness in getting it completed so that the health care team had updated information. (c) – Great job reviewing the EHR to collect data while he was awaiting his operation. You were able to make connections regarding his lab values (hgb) and the potential to hold surgery due to the risk of increased blood loss. NS

Week 9 4(f) - As far as responding to the question prompts this week, I thought you did a really nice job demonstrating clinical judgment and understanding of the patient's situation. I appreciated the details provided that will help your fellow classmates learn from the experience. Refer to my comments back to your initial post and response post for more details. All criteria were met on the CDG grading rubric for a satisfactory evaluation. Well done! NS

Week 11 4(f) – Another job well done with your CDG requirements this week. All criteria were met for a satisfactory evaluation. I have provided more detailed comments in response to your initial and response post to a peer. Keep it up! NS

Week 13 4(f) – Your CDG responses this week provided great detail, explained the patient situation well, and demonstrated clinical judgment in regards to nursing interventions to be performed. Nice job analyzing the prescribed medications for your patient and discussing your medication administration experience. Your thoughts were supported with an in-text citation and reference to help enhance the conversation with research. All criteria were met for a satisfactory evaluation. NS

<b>Objective</b>																
4. Exemplify psychomotor skills and nursing care safely using evidence-based practice. (3,4,5,7,8)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
<b>Competencies:</b>																
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
b. Apply the principles of asepsis and standard/infection control precautions (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).										N/a	N/a	S	N/a	S	N/a	S
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
e. Organize time providing patient care efficiently and safely (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/z	S
f. Manages hygiene needs of assigned patient (Responding).										S	N/a	S	N/a	S	N/a	S
g. Demonstrate appropriate skill with wound care (Responding).											N/a	S	N/a	S NA	N/a	NA
<b>h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).</b>							S	N/a	S							S
<b>Faculty/TA Initials</b>							BL	CB	CB	NS	NS	NS	NS	NS	NS	NS

\* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

**\*\*You must document the location of the pull station and extinguisher here for your first clinical experience.**

There was a fire extinguisher located by room 3027 by the exit stairwell. There was a pull station located by room 3021. **Great job! BL**

**Comments**

Week 9 5(b) – You were able to experience a new environment in the operating room this week. As a result, you were able to develop a better understanding of the importance of aseptic/sterile technique. You elaborated on this in your CDG response and recognized the importance of maintaining sterility to prevent complications. NS

Week 9 5(e) – I wanted to make mention again the importance of how well you executed your time management this week. With an early surgery, it is important to complete your assessments and ensure all pre-op orders have been completed prior to the patient be transferred. You were on top of it this week, entering the room quickly, performing your assessments timely and accurately, and ensuring the patient was well prepared. Great job! NS

Week 9 5(f) – Experience was gained performing a pre-surgical CHG bath. As we discussed, this is important to remove and skin contaminants prior to the incision being made. NS

Week 11 5(b,c,d) – This week you had the opportunity to perform new skills in the clinical setting. You were tasked with discontinuing a foley catheter on your patient. You took on this challenge with confidence, and demonstrated competence in the skill. During catheter removal, you maintained aseptic technique, carefully assess the patient prior to removal, and successfully discontinued the catheter without complications. You also gained experience caring for a JP drain and hemovac, ensuring that they were draining adequately and emptying them effectively. Well done! NS

**Objective**

5. Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)\*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
<b>Competencies:</b> a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding).										S	N/a	S	N/a	S	S	S
<b>Faculty/TA Initials</b>									CB	NS	NS	NS	NS	NS	NS	NS

\* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

**Comments:**

Week 9 6(a) – Good work this week in describing your patient’s situation, using clinical judgment in your assessment of the patient and his lab values/diagnostics, and identifying a priority nursing problem of acute pain following surgery. Although you did not get the opportunity to care for him post-op, you were able to observe the operation being performed and recognized the potential pain that he will experience in the recovery period. NS

Week 11 6(a) – You were able to demonstrated strong clinical judgement skills this week in caring for your patient and during our discussions. You conducted research, asked pertinent questions, and learned a lot about a rare complication of spine surgery. In your CDG, you provided great detail about your patient’s situation and supported your identified priority problem of impaired mobility with specific details. NS

Week 13 6(a) – Nice job this week discussing priorities for your patient’s plan of care. For your patient on day one admitted with a SBO and subsequent frequent loose stools, you were able to identify dysfunctional gastrointestinal motility as the priority nursing problem. You discussed assessment findings that supported this as the priority, including signs of dehydration, frequency and characteristics of her loose stools, and complications to monitor for. You were able to list several pertinent interventions aimed at improving your patient’s condition. NS

Week 14 6(a) – Satisfactory completion of nursing care map clinical assignment. See the attached grading rubric below for more details. NS

Objective																
6. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
<b>Competencies:</b>																
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).													N/a	S	N/a	S
b. Recognize patient drug allergies (Interpreting).													N/a	S	N/a	S
c. Practice the rights of medication administration and safety checks prior to medication administration (Responding).													N/a	S	N/a	S
d. Administer oral, intramuscular, subcutaneous, and intradermal medications using correct techniques (Responding).													N/a	S	N/a	S
e. Review the patient record for time of last dose before giving PRN medication (Interpreting).													N/a	S	N/a	S
f. Assess the patient response to PRN medications (Responding).													N/a	S	N/a	S
g. Demonstrate medication administration documentation appropriately using BMV (Responding).												S	N/a	S	N/a	S
<b>*Week 11: BMV</b>									CB	NS	NS	NS	NS	NS	NS	NS
<b>Faculty/TA Initials</b>																

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 Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

**Comments:**

Week 11 (7g) - You are satisfactory for this competency by attending the Bedside Medication Verification (BMV) clinical orientation, actively listening, observing, and discussing accurate medication documentation and safe administration with the use of the BMV scanner. NS/CB/SA

**Objective**

2. Exemplify professional conduct through self-reflection, responsibility for learning, and goal setting. (1,5,7)\*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
<b>Competencies:</b>																
a. Reflect on areas of strength** (Reflecting)							S	N/a	S	S	N/a	S	N/a	S	N/a	S
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)							S	N/a	S	S	N/a	S	N/a	S	N/a	S
c. Incorporate instructor feedback for improvement and growth (Reflecting).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
g. Comply with patient's Bill of Rights (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).							S	N/a	S	S	N/a	S	N/a	S	N/a	S
i. Actively engage in self-reflection. (Reflecting)							S	N/a	S	S	N/a	S	N/a	S	N/a	S
<b>Faculty/TA Initials</b>							BL	CB	CB	NS	NS	NS	NS	NS	NS	NS

Week 13 7(a-g) – Overall, you had a successful and safe first medication administration experience. You were able to gain experience administering oral medications that were prescribed to your patient and administered a subcutaneous injection. You were able to tell me the 7 rights of medication administration, performed three safety checks, and accurately utilized the BMV scanner to ensure safety. You noted and assessed that your patient did not have any medication allergies listed. In discussing each medication, you were able to identify the therapeutic and pharmacological classification, generic and brand name, indication specific to the patient, pertinent adverse reactions/side effects, and nursing assessments to be performed prior to administration. You identified that your patient was experiencing several loose stools throughout the night and into the morning during initial assessment. As a result, you used your nursing judgment to discuss the patient's prescribed stool softener medication and made the correct decision to hold that medication to prevent worsening complications. You also gained experiencing reviewing the MAR for a requested PRN medication, ensuring the last administration date and evaluating her response. NS

\* End-of-Program Student Learning Outcomes  
Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

**\*\* Strength/weakness reflection (a,b): Must have different written example each week of clinical/lab. You must explain your plan for how you will improve. Example, "I am having a difficult time with obtaining a manual BP. I will get a BP cuff from Amy and practice manual BP's with at least three members of my family this week." Please ensure that you answer this section in-depth with your plan of action. Each week must be different.**

**Comments:**

One of my strengths is confidence, by walking into the patient's room and explaining to the patient what I was going to assess. I felt good walking in since it wouldn't be my first time since I work at the hospital. I was nervous going in since I was in a different role, but as I was talking to the patient it felt natural to me on how I was talking through my assessments to the patient. **Great job, Rylee! You did an excellent job during your first clinical experience. Your confidence and competence will only grow stronger as you gain more experience. BL**

One of my weaknesses was that I forgot to assess my patient's mental status, if they use any ambulatory aides, and ask to squeeze my hands and flex their feet. For my next clinical, I will write myself off a check list to make sure I don't forget anything. **Nice job taking time to reflect on an area of improvement for your next clinical experience. It is completely normal to miss some pieces of your head to toe assessment the first time you perform it on a real patient. Creating a checklist is a great idea to implement. I would also recommend taking time to practice on family member or friend as well. BL**

Week 7-8(i) You did a wonderful job reflecting on your first clinical experience in your CDG this week. You provided a nice description of your thoughts and feelings before and after the experience. Keep up all your great work! BL

**Week 9: One of my strengths during clinical this week was communicating well with my patient before surgery. I could tell he was nervous, so I tried to talk to him just to get his mind off of his surgery. Very good, Rylee! I am glad that you were able to be there to support him and his psychosocial needs. This is important to consider any time you have a patient undergoing a procedure. Having the emotional intelligence to recognize that surgery is nerve-racking and having the empathy to communicate with him to calm his nerves is a great strength to note! NS**

One of my weaknesses was I feel like I was disorganized with my head to toe. Next time I will take my time, go slow, and not rush. I will try to make myself a check list before and check after to see if I might've missed anything. **Good reflection on an area for improvement! Your normal routine was thrown off with having to get your assessment done quickly due to him having surgery. I am sure with your plan and a more normal clinical experience you will feel more comfortable next week. Keep up the hard work! NS**

**Week 11: One of my strengths during clinical this week was paying attention to detail. I paid close attention to the areas my patient felt sensation and didn't feel sensation to see if there was any changed in my patients feeling in his legs. Very good! A careful and thorough assessment to determine improvement or decline in his condition is essential to promote optimal outcomes. You were tasked with having to conduct a thorough neuro assessment on a complex patient, which I think you handled quite well! Great job. NS**

One of my weaknesses is that I feel that I overly criticize myself on everything that I do. Next time I overly criticize myself at clinical I will take a step back and remind myself that I will not always be perfect. **Give yourself some grace as you are learning. We are often more critical of ourselves than others. While setting high expectations for yourself can be a positive, remember not to be too hard when things may not go exactly as planned. Every experience is a learning opportunity. You have demonstrated significant strides in your abilities and I am excited to see you continue to grow. NS**

**Week 13: One of my strengths this week was assisting to my patient whenever they needed something. I checked up on my patient every so often to make sure they had everything they needed. Good! As I mentioned previously, your time management and independence in clinical this semester were major strengths of yours. You consistently had nursing care tasks already performed when I would mention them to you. You were always on top of the patient care required and continuously monitored your patient to address their needs. Great job! NS**

One of my weaknesses was that I lacked confidence in new skills that I performed. Next time I will use positive talk to help me gain confidence in myself to perform new skills. **Positive self-talk goes a long way! I hope you noticed the growth in yourself this semester. Always reflect back on the positives and remember you got this! NS**

Final Clinical Comments – Rylee, **congratulations** on completing your first semester of clinical in nursing school with a satisfactory evaluation, certainly an accomplishment worth celebrating! It was a pleasure to work with you throughout this semester. You have shown tremendous growth and I am excited to see you continue to progress throughout your time here in the program. From your first clinical day to your last, your confidence rose and your skills improved. It was awesome to watch as you put the pieces together on your patients using clinical judgement and understanding your patients as a whole. You made great use of your time and put in the effort to learn more about your patients. You asked though-provoking questions to enhance your learning and to promote positive outcomes for your patients. I appreciated your willingness to help your peers in unfamiliar situations. Your ability to be a team player will take you far in your career, as teamwork is essential in nursing. You were able to provide support to fellow classmates that were unfamiliar in the clinical setting and I know that positively impacted their clinical experience. It was great to see your positive mindset throughout this semester. You were able to learn from past experiences, came back refreshed and focused, and proved to yourself you have what it takes to be successful. Your time management and independence in performing nursing care was a major strength! You had the opportunity to observe a surgery for this first time and shared your experiences in debriefing to help others learn. You also cared for a patient that went through a major lifestyle change that brought upon many emotions. This was a challenging situation that I felt you handled well and helped provide support to him during a difficult time. Be sure to stay motivated and focus on your goals as you approach the next semester. You have a bright future ahead of you and will positively impact patients that you encounter. Overall you had a very successful first semester! I look forward to working with you next semester as you continue your journey and take one step closer to achieving your goals. Great job and keep up the hard work! NS

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials
11/13/2025	Impaired Physical Mobility	*S/NA	*NA

Note: Students are required to submit one satisfactory care map by 11/17/2025 at 0800. If the care map is not evaluated as satisfactory upon initial submission, the student may revise the care map based on instructor feedback/remediation and resubmit one time by 11/24/2025 at 0800 to receive a satisfactory evaluation. **\*See Attached Nursing Care Map Grading Rubric**

Firelands Regional Medical Center School of Nursing  
Care Map Grading Rubric

Student Name: Rylee Bollenbacher		Course 6					
Date or Clinical Week: Week 11		Objective:					
Criteria		3	2	1	0	Points Earned	Comments
<b>Noticing</b>	1. Identify all abnormal assessment findings (subjective and objective); include specific patient data.	(lists at least 7*) *provides explanation if < 7	(lists 5-6)	(lists 5-7 but no specific patient data included)	(lists < 5 or gives no explanation)	3	<p>A thorough list of 16 abnormal assessment findings are listed, including both objective and subjective data. The assessment findings that are listed are specific and well detailed. Findings are based on the patient care provided during the clinical experience. Well done!</p> <p>Six abnormal lab/diagnostic findings are provided. The lumbar spine MRI is listed with specific findings indicating the changes occurring in the spine and subsequent symptoms the patient is experiencing.</p> <p>Eight risk factors are identified, based on the patient's current and past medical history and age.</p>
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	(lists at least 3*) *provides explanation if < 3		(lists 3 but no specific patient data included)	(lists < 3 or gives no explanation)	3	
	3. Identify all risk factors relevant to the patient.	(lists at least 5*) *provides explanation if < 5	(lists 4)	(lists 3)	(lists < 3 or gives no explanation)	3	
<b>Interpreting</b>	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	<p>Eight pertinent and high priority nursing problems are identified. Based on the data from the noticing section, it is appropriately determined that impaired physical mobility to the top priority problem as a result of the cauda equina syndrome and subsequent loss of sensation and mobility of the lower legs. Great job!</p> <p>Based on the top priority problem, a realistic and attainable goal statement is provided and is a positive statement directly related to the top priority problem. Great job identifying a goal that is realistic for the given situation.</p> <p>Most relevant data from the noticing section is highlighted to support the identified top priority problem. Consider including his history of Parkinson's and tremors as relevant data for impaired mobility. This disease process and manifestations of tremors can lead to issue with safe mobility.</p> <p>Based on the identified top priority problem, three potential complications are listed. Each potential complication is relevant to the situation and are important considerations to monitor for. For each listed potential complications, specific signs and symptoms to monitor for are</p>
	5. State the goal for the top nursing priority.	Complete			Not complete	3	
	6. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	7. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)	3	
	8. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)	3	

							appropriately listed. For DVTs and constipation, instead of stating “dehydration” as a sign/symptom, describe what a patient would present with related to dehydration. This allows the nurse implementing the plan of care to look out for specifics, such as dry mucous membranes, decreased urine output, increased thirst, poor skin turgor, etc.
<b>Responding</b>	9. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete	2	13 pertinent nursing interventions are identified and are directly related to the top priority nursing problem. Consider including assessments related to identifying his level of mobility, ability to help, knowledge of limitations, etc. You may also include interventions related to collaborating with PT/OT to determine goals of care. Additionally, since his mobility is severely limited, you may want to include a fall risk assessment, and implement fall precautions. Just some thoughts to consider!  Interventions listed are prioritized appropriately with assessments taking highest priority. Each listed intervention included an appropriate frequency. Listed interventions are individualized to the specific patient situation and realistic to be performed.
	10. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	11. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	12. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete	3	

Criteria		3	2	1	0	Points Earned	Comments
	13. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete	3	Each listed intervention includes an appropriate rationale. 3
<b>Reflecting</b>	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	An updated list of re-assessment findings is included based on the last patient encounter. Thorough details provided. Based on the findings, it is appropriately determined for the need to continue the plan of care. Great job!
	15. Evaluation includes one of the following statements: <ul style="list-style-type: none"> <li>Continue plan of care</li> <li>Modify plan of care</li> <li>Terminate plan of care</li> </ul>	Complete			Not complete	3	

### Reference

An in-text citation and reference are required.  
The care map will be graded “needs improvement” if missing either the in-text citation or reference, but not both.  
The care map will be graded “unsatisfactory” if both in-text citation and reference are not included.

Total Possible Points= 45 points

**Total Points: 44/45 - Satisfactory**

45-35 points = Satisfactory

34-23 points = Needs Improvement\*

< 23 points = Unsatisfactory\*

**\*Total points adding up to less than or equal to 34 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.**

**\*\*\*Students that are not satisfactory after 2 attempts will be required to meet with course faculty for remediation. \*\*\***

**Faculty/Teaching Assistant Comments: Rylee, overall you did a very nice job with your first care map assignment. You were thorough in your data collection and identified pertinent nursing priorities for your patient. It appears that you were able to utilize your clinical judgement in understanding the plan of care for a patient with impaired physical mobility as a result of an unfortunate diagnosis of cauda equina syndrome. Great job identifying potential complications and interventions for his plan of care. Keep up the hard work!**

**Faculty/Teaching Assistant Initials: NS**

Firelands Regional Medical Center School of Nursing  
Nursing Foundations 2025  
Simulation Evaluations

<b>Student Name:</b>					
<b>Performance Codes:</b> S: Satisfactory U: Unsatisfactory			<b>Evaluation</b> <small>*(Refer to LCJR)</small>	<b>Faculty Initials</b>	<b>Remediation Date/Evaluation/Initials</b>
<b>Date:</b> 11/4/25	Simulation #1 (2,3,5,8) *	Scenario	S	NS	NA
		Survey	S	NS	NA
<b>Date:</b> 11/24/25	Simulation #2 (2,3,5,7,8) *	Scenario	S	CB	NA
		Survey	S	CB	NA

\* Course Objectives

11/4/25 – Satisfactory completion of NF Simulation #1. See the attached Lasater Clinical Judgment scoring sheet below. NS

11/24/25 – Satisfactory completion of NF Simulation #2. See the attached Laster Clinical Judgment scoring sheet below. CB

# Lasater Clinical Judgment Rubric Scoring Sheet

**Student Roles: O=Observer**

STUDENT NAME(S) AND ROLE(S): Rylee Bollenbacher (O), Katelyn Swingle (O)

GROUP #: 2

SCENARIO: NF #1

OBSERVATION DATE/TIME(S): 11/4/2025 1130-1230

CLINICAL JUDGMENT COMPONENTS	<u>OBSERVATION NOTES</u>
<p><b>NOTICING: (1,2,4,6,7) *</b></p> <ul style="list-style-type: none"> <li>Focused Observation:            E            A            D            B</li> </ul>	<p><b><u>Focused Observation</u></b>                      Observers did a great job actively paying attention to detail throughout scenario.                      Observed low SpO2 result and reported in debriefing the need for oxygen.</p>
<p><b>REFLECTING: (1,2,4,5,6,8) *</b></p> <ul style="list-style-type: none"> <li>Evaluation/Self-Analysis:    E            A            D            B</li> <li>Commitment to Improvement: E            A            D            B</li> </ul>	<p><b><u>Evaluation/Self-Analysis</u></b>                      Constructive feedback was provided during debriefing. Observers provided good insight on safe medication administration, including the rights of medication administration. Observers also praised students for initiating O2 via nasal cannula for low SpO2 per orders while also discussing the need for prompt intervention.</p> <p><b><u>Commitment to Improvement</u></b>                      Constructive feedback was provided related to areas for improvement. Good discussion and support amongst those performing in the scenario and the observers.</p>
<p><b>SUMMARY COMMENTS: * = Course Objectives</b></p> <p><b>Satisfactory completion of the simulation scenario is a score of “Developing” or higher in all areas of the rubric.</b></p> <p><b>E= Exemplary</b></p> <p><b>A= Accomplished</b></p> <p><b>D= Developing</b></p> <p><b>B= Beginning</b></p> <p><b>Scenario Objectives:</b></p> <ul style="list-style-type: none"> <li>Demonstrate collaborative communication with patients and healthcare team members (1,3,8) *</li> <li>Execute accurate and complete head to toe assessment (1,5,6,8) *</li> <li>Select and administer prescribed oral medications following the six rights (1,4,5,7) *</li> <li>Identify and provide accurate patient education (1,2,3,4,5,7) *</li> </ul>	<p>Lasater Clinical Judgement Rubric Comments:</p> <p><b>Noticing</b></p> <p><u>Focused Observation:</u> Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information</p> <p><b>Reflecting</b></p> <p><u>Evaluation/Self-Analysis:</u> Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives</p> <p><u>Commitment to Improvement:</u> Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses</p>

# Lasater Clinical Judgment Rubric Scoring Sheet

**Student Roles: A=Assessment Nurse; M=Medication Nurse**

STUDENT NAME(S) AND ROLE(S): Rylee Bollenbacher (A), Katelyn Swingle (M)

GROUP #: 2

SCENARIO: NF #2

OBSERVATION DATE/TIME(S): 11/24/2025 0900-1000

CLINICAL JUDGMENT COMPONENTS	OBSERVATION NOTES
<p><b>NOTICING: (1,2,4,6,7) *</b></p> <ul style="list-style-type: none"> <li>• Focused Observation: E A D B</li> <li>• Recognizing Deviations from Expected Patterns: E A D B</li> <li>• Information Seeking: E A D B</li> </ul>	<p>Identified patient with name and DOB and compared to wristband for patient safety.</p> <p>Noticed low SpO2 (90%) when obtaining vital signs.</p> <p>Focused observation on patient’s respiratory status.</p> <p>Noticed crackles on auscultation.</p> <p>Noticed sputum/tissues in the bed and sought out more information.</p> <p>Noticed patient coughing with complaints of pain.</p> <p>Sought additional information related to patient’s pain (rating, characteristics). Noticed patient’s pain 7/10.</p> <p>Noticed PRN medications for pain. Noticed order for morphine.</p> <p>Sought information related to allergies and any use of supplements prior to medication administration.</p> <p>Consider asking patient preference for injection location.</p> <p>Sought additional information after medication administration related to relief and comfort.</p>
<p><b>INTERPRETING: (1,2,4,6,7) *</b></p> <ul style="list-style-type: none"> <li>• Prioritizing Data: E A D B</li> <li>• Making Sense of Data: E A D B</li> </ul>	<p>Prioritized vital signs when entering the room.</p> <p>Prioritized oxygenation status, made sense of SOB and physician order for oxygen at 2L NC.</p> <p>Prioritized pain assessment when noticing patient in pain. Remember to complete all steps of a pain assessment (discussed in debriefing).</p> <p>Made sense of need to communicate with medication nurse to medicate for pain.</p> <p>Made sense of the MAR related to pain rating.</p> <p>Prioritized correct PRN pain medication (morphine for pain 7/10).</p> <p>Consider administering pain medications prior to continuing full assessment for patient comfort. Team members can collaborate to administer medications then return to complete full assessment.</p>
<p><b>RESPONDING: (1,2,3,4,5,6,7) *</b></p> <ul style="list-style-type: none"> <li>• Calm, Confident Manner: E A D B</li> <li>• Clear Communication: E A D B</li> </ul>	<p>Introduced self and role when entering the room for communication.</p> <p>Elevated HOB for shortness of breath</p> <p>Administered O2 via nasal cannula at 2L for Spo2 of 90%.</p>

<ul style="list-style-type: none"> <li>Well-Planned Intervention/ Flexibility: E A D B</li> <li>Being Skillful: E A D B</li> </ul>	<p>Focused respiratory assessment performed.</p> <p>Performed pain assessment in response to patients' complaints of pain. Consider focusing your assessment on the location of pain (look, auscultate).</p> <p>Did not perform dosage calculation. Administered 6mg of morphine to patient. (Discussed in debriefing need to waste 1ml (2mg) of morphine and need for witness when wasting excess narcotics).</p> <p>Confirmed name, DOB, and allergies prior to medication administration. Utilized BMV correctly for medication administration. Educated patient on morphine ordered for pain.</p> <p>Selected deltoid muscle for injection site. IM needle (22g, 1in) injected at 90-degree angle. Remember to aspirate prior to injecting medication to assess for presence of blood. Initiated safety on needle correctly after injection.</p> <p>Good communication with the patient regarding plan for pain relief. Good communication among team members.</p> <p>Good communication with the patient during assessment for comfort.</p> <p>Re-evaluated Spo2 of 94% after oxygen administration and additional interventions.</p> <p>Consider providing information on alternatives to smoking such as a nicotine patch.</p> <p>Education on morphine once prompted by patient.</p> <p>Educated and encouraged patient on performing breathing exercises with incentive spirometry, coughing and deep breathing, and splinting with a pillow to help with pain/discomfort.</p> <p>Educated patient on importance of hydration related to increase in sputum.</p>
<p><b>REFLECTING: (1,2,4,5,6,8) *</b></p> <ul style="list-style-type: none"> <li>Evaluation/Self-Analysis: E A D B</li> <li>Commitment to Improvement: E A D B</li> </ul>	<p>Each member actively participated in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas for improvement related to prioritization and IM injections and discussed ways to make improvements in the future. Discussed importance of focused pain and respiratory assessment before completion of thorough head to toe assessment. Discussed medication error remediation and variance reporting. Identified educational opportunities that were presented in the scenario. Reflected on clinical judgement and critical thinking that required. Emotions, thoughts and feelings were explored. Each member demonstrated a desire to improve nursing performance.</p>
<p><b>SUMMARY COMMENTS: * = Course Objectives</b></p> <p><b>Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.</b></p> <p><b>E= Exemplary</b></p> <p><b>A= Accomplished</b></p> <p><b>D= Developing</b></p> <p><b>B= Beginning</b></p> <p><b>Scenario Objectives:</b></p> <ul style="list-style-type: none"> <li>Demonstrate collaborative communication with patients and healthcare team members (1,3,8) *</li> <li>Differentiate between need for complete head to toe versus focused assessment and execute accordingly (1,5,6,8) *</li> <li>Select and administer prescribed oral and intramuscular</li> </ul>	<p>Lasater Clinical Judgement Rubric Comments:</p> <p><b>Noticing:</b> Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads.</p> <p><b>Interpreting:</b> Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.</p> <p><b>Responding:</b> Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.</p> <p><b>Reflecting:</b> Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives. Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses.</p> <p><b>Satisfactory completion of NF Simulation #2!</b></p>

<ul style="list-style-type: none"> <li>medications following the six rights (1,4,5,7) *</li> <li>Identify and provide accurate patient education (1,2,3,4,5,7) *</li> <li>Recognize patient oxygenation and pain control needs and provide appropriate interventions (2,4,5,6,7) *</li> </ul>	
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<b>Skills Lab Competency Evaluation</b>	<b>Lab Skills</b>										
	<b>Week 1 (4)*</b>	<b>Week 2 (2,3,5,8)*</b>	<b>Week 3 (2,3,4,5,8)*</b>	<b>Week 4 (2,3,4,5,8)*</b>	<b>Week 5 (2,3,4,5,8)*</b>	<b>Week 6 (1,2,3,4,5,8)*</b>	<b>Week 7 (2,3,4,5,8)*</b>	<b>Week 8 (2,3,4,5,8)*</b>	<b>Week 9 (2,3,4,5,8)*</b>	<b>Week 10 (2,3,4,5,6,8)*</b>	<b>Week 11 (2,5,7)*</b>
	<b>Date:</b> 8/18/2025	<b>Date:</b> 8/27/2025	<b>Date:</b> 9/4/2025	<b>Date:</b> 9/11/2025	<b>Date:</b> 9/16,18/ 2025	<b>Date:</b> 9/23/2025	<b>Date:</b> 9/30/2025	<b>Date:</b> 10/7/2025	<b>Date:</b> 10/14/2025	<b>Date:</b> 10/21/2025	<b>Date:</b> 10/28/2025
Performance Codes: S: Satisfactory U: Unsatisfactory											
Evaluation:	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	HS	HS	AR	HS	AR	AR	NS	NS	AR	AR	AR
<b>Remediation:</b> Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
<b>Remediation:</b> Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

\*Course Objectives

Firelands Regional Medical Center School of Nursing  
Nursing Foundations 2025  
Skills Lab Competency Tool

Student Name: Rylee Bollenbacher

Comments:

**Week 1 (Technology Lab):** During this lab you were able to satisfactorily navigate:

- Edvance360 Learning Management System.
- Skyscape Resource System.
- Assessment Technologies Institute (ATI) / Shadow Health.
- Guided tour of library and computer lab. HS

**Week 2 (Hand Hygiene; Vital Signs; PPE):** During lab this week you were able to satisfactorily demonstrate:

- Appropriate hand hygiene utilizing hand sanitizer and soap/water.
- Accurate verbalization of procedure for donning & doffing PPE.

Appropriate level of skill during guided practice with measurement of radial and brachial pulses, along with manual blood pressure. Vital signs skills will be observed 1:1 with faculty during Week 3. Keep up the good work! HS

**Week 3 (Vital Signs):**

Excellent work in the lab this week! You satisfactorily completed the vital sign check off during 1:1 observation, including oral temperature (Tempa Dot), radial pulse, respiratory rate, pulse oximetry, and blood pressure measurement. During the blood pressure measurement, you accurately obtained two out of two blood pressure results on the Vital Sim manikin. The first blood pressure measurement was set at 124/80 and you identified it as 128/78. The second measurement was set at 158/88 and you interpreted it as 160/90. Great job! You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic vital sign assessments. You did not require any prompts during completion of your 1:1 observation and provided accurate detail in your communication with the “patient”. You did a great job with your first Meditech documentation, however you did not link/document a nurse’s note as instructed. The remainder of your documentation was accurate and complete. Keep up the great work!! AR

**Week 4 (Assessment):**

Satisfactory with head to toe assessment guided practice, hand-off report activity, Lexicomp/Intranet navigation activity, and the assessment/safety activity utilizing your clinical judgment skills. Great job! You will be observed 1:1 for Head to Toe Assessment competency during Week 5. HS

**Week 5 (Assessment; Mobility):**

Excellent job in lab this week! You have satisfactorily performed a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall very well done. You paid close attention to detail and were clearly well-prepared. You did not require any prompts throughout your assessment, nice work! You demonstrated professional and informative communication. You were able to correctly identify the lung sounds as wheezes. Job well done! AR

Feedback on documentation this week: With this being the first time that you fully documented these interventions, there are some areas for improvement. You did a good job, overall, with your Meditech documentation. You documented on the interventions listed below; however, some areas were inaccurate and omitted. Please review each area of documentation within the next two weeks so you can examine areas that were omitted. I want you to feel comfortable and confident with Meditech documentation.

- **Pain-** omitted documentation of physician already aware of pain.
- **Vital signs-** Documentation complete and accurate.
- **Safety-** omitted isolation reason and comment of “pneumonia.”
- **Physical reassessment-** HEENT – omitted clear eye discharge. Psychosocial- comment “My husband died two weeks ago” should be documented in the expressed/other feelings comment box and the comment “I just don’t feel like taking my meds anymore when I am at home” should be documented as an infective coping statement. Cardiovascular- you do not document that your patient is on telemetry until your last semester because you have not been taught heart rhythms; documented 2+ edema to LUE non-pitting edema. Neurological- documented right eye appearance as round, it should be irregular. Gastrointestinal- omitted use of daily bowel movements aids used; omitted hypoactive bowel sounds. AR

Mobility Lab 9/18/2025: Satisfactory completion of mobility lab through demonstration of the following: Logrolling/turning a patient, lifting a patient in bed, repositioning from lying to sitting, repositioning from sitting to standing, stand/pivot transfer from a bed to a chair, ambulating with a walker, ambulating with crutches, ambulating with a cane, use of a gait belt, and safe use of a wheelchair. Proper body mechanics were utilized to promote safety for the health care worker and the patient. Great job with active participation throughout the duration of the lab. AR

**Week 6 (Personal Hygiene Skills):**

Satisfactory with patient hygiene, making an occupied bed, shaving, oral care, hearing aid care, application of ace wraps, TED Hose/SCD's, and clinical readiness scenario during guided practice. Completed Meditech documentation for Hygiene and Ted Hose. Keep up the great work! AR

**Week 7 (NG Skills: Insertion, Irrigation, and Removal; Feedings):**

Great job this week in lab demonstrating competence for Nasogastric Tube Insertion, Irrigation, and Removal through 1:1 observation. You are satisfactory in all NG skills. You did not require any prompts for the insertion, irrigation, or removal of the NG tube, very well-done! You were able to practice administering intermittent tube feeding using the gravity method while also confirming tube placement with gastric residual. Additionally, you participated in the PO intake station for accurate calculation of carbohydrate intake, accurately measured gastric output through the NG tube, practiced assisting a visually impaired patient with their meal, and completed the assigned documentation in Meditech. Keep up the hard work! NS

**Week 8 (Foley Skills: Insertion, Removal; Sterile Gloves; I&O, Documentation Lab):**

You did a great job in the lab this week and were satisfactory with the following skills: Sterile Glove Application, Foley Catheter Insertion (female), and Foley Catheter Removal. You did not require any prompts throughout the procedure, nice work! You maintained the sterile field throughout the Foley insertion, and did not contaminate the catheter or your gloves at any point. You correctly verbalized the differences in catheter insertion for a male patient. You also actively participated in the Intake and Output stations, and completed Meditech documentation related to Urinary Catheter Management and Intake & Output. Keep up the great work! NS

Documentation Lab – You have satisfactorily completed the documentation lab by actively participating in Meditech documentation related to vital signs, physical re-assessment, safety and falls, pain assessment, patient rounds, TED hose/SCD/Ace wrap, feeding method, Intake and Output, urinary catheter management, and writing a nurse note. You utilized your time wisely, asked appropriate questions, and gained experience with each intervention listed in preparation for clinical. Great job! CB

**Week 9 (Wound Care: Dry Sterile, Damp to Dry Packed, Stoma Skills):**

You have demonstrated competence in the skill of wound assessment and wound care through guided observation of Dry Sterile Dressing and 1:1 observation of Damp to Dry Packed Wound Dressing Change. During the Damp to Dry Packed Wound Dressing Change, you did require two prompts: you reached over the sterile supplies after opened, and wrote directly on the tape that was applied to the dressing which could cause the patient harm and pain. You were able to recognize and correct the contamination to your cotton tipped applicators, and your assessment of the wound was excellent! Your communication with the patient was also excellent. Documentation was completed related to wound care and patient rounds in the Meditech system. Additionally, you participated in the stoma care station to gain additional knowledge and skills. Great job this week! AR

**Week 10 (Safety; Infection Control; Prioritization; Weight; Pressure Ulcer Prevention; Soft Restraints; Doppler BP):**

Satisfactory participation with the following stations: Prioritization, Patient Weight, Restraints, Doppler BP, Meditech documentation, and Patient Scenario involving Safety, Infection Control, and Pressure Ulcer Prevention. Keep up the hard work! AR

**Week 11 (Medication Lab):**

Satisfactory participation and performance of the following skills in the medication lab: Oral, IM, SQ, and ID medication administration; performance of IM injection on fellow student; performance of SQ & ID injection on practice pad/sponge; use of and drawing medication out of ampule and vial; communication/accountability activity with awareness of allergies & dosage calculation. AR

7/8/2025



**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Nursing Foundations – 2025**

**Firelands Regional Medical Center School of Nursing**  
**Sandusky, Ohio**

I was given the opportunity to review my final clinical ratings in each course competency. I was given the opportunity to ask questions about my clinical performance. I have the following comments to make about my clinical performance/final clinical evaluation:

Student eSignature & Date: Rylee Bollenbacher 12/1/2025